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## BIB DATA SHEET

CONFIRMATION NO. 2262

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/560,655	08/11/2006	435	1648	66146-50664
<b>RULE</b>				
<b>APPLICANTS</b> Paul D. Olivo, St. Louis, MO; Peter L. Collins, Silver Spring, MD; Mark E. Peebles, Bexley, OH;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/18783 06/14/2004 <span style="border: 1px solid black; padding: 2px;">which claims benefit of</span>				
<b>FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA 60478521 06/13/2003				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/29/2006				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/STUART SNYDER/</u> Examiner's signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MO	<b>SHEETS DRAWINGS</b> 6	<b>TOTAL CLAIMS</b> 32
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> THOMPSON COBURN, LLP ONE US BANK PLAZA SUITE 3500 ST LOUIS, MO 63101 UNITED STATES				
<b>TITLE</b> Negative strand rna virus replicon				
<b>FILING FEE RECEIVED</b> 1530	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	